End of Case Summary

FY24-25 Forensic Investigative Genetic Genealogy Grant Program State Financial Assistance

This form should be completed as soon as practicable upon completion of laboratory testing and investigative genetic genealogy activities funded by the grant, and must be completed no later than one year after receipt of funds.

# CASE DETAILS

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| --- | --- |
| Recipient Agency Name |  |
| 1. Case # / Identifier   *If funding received for multiple cases, list all cases involved.* |  |
| 1. Amount of FDLE FIGG Grant Funding received for this case(s) | $ |
| 1. Type of case(s) for which reimbursement was requested | Perpetrator: UHR:  Homicide  Unknown homicide victim  Sexual Assault  Unknown Doe (homicide not suspected)  Other qualifying violent crime |
| 1. If Other, please specify |  |
| 1. Laboratory to which the SNP testing was outsourced | Bode Technology, Inc.  DNA Labs International – Intermountain Forensics  Othram, Inc.  Other – Must provide ANAB or A2LA Accreditation Certificate, ISO/IEC 17025; Refer back to Application for requirements; Scope must include SNPs using MPS/NGS |
| * 1. Type of SNP testing performed | Microarray  Forensic Grade Genome Sequencing®  Small Benchtop Sequencer / Platform (e.g. targeted SNP panels on AVITI, MiSeq)  Whole Genome Sequencing  Unknown; please include copy of the lab report |
| * 1. Number of markers attempted and number or percent obtained |  |
| * 1. If a non-laboratory entity was the primary vendor, specify vendor and/or practitioner name (e.g., XYZ Genetic Genealogy; Jan Smith, CGG) |  |
| 1. Results of testing | Sample failed SNP laboratory testing  SNP testing results insufficient for database upload  SNP profile uploaded to GEDmatch/FTDNA, GGI in progress  SNP profile uploaded to GEDmatch/FTDNA, insufficient matches to pursue, monitoring  Target reference tester sample research & collection in process  Target reference tester sample – testing in process  Person of Interest identified (perpetrator case) – no STR confirmation possible  Person of Interest identified (perpetrator case) – STR confirmation in process  Person of Interested identified – STR confirmed  UHR identified – STR confirmation not possible  UHR identified – STR confirmation in process  UHR identification – UHR confirmed by STR and/or MEO otherwise ID for death certificate  Other |
| * 1. If Other, describe |  |
| 1. If a Person of Interest or UHR was identified, provide the amount of time it took from the date the first sample was shipped, until the ID was confirmed |  |
| * 1. If no identification was made, advise actions being taken or if the case is being monitored for database matches |  |

# Additional information

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| List any expenditures associated with the FIGG process (e.g. evidence exam or sample prep by private lab, investigator travel, etc.) and associated costs not included in reimbursed amount. |  |
| What, if any, additional support or information from FDLE might benefit your agency regarding the FIGG process for this specific case or in general? |  |
| If IGG is/was conducted in-house by your agency, please provide a brief overview of the individual’s credentials/training. May be attached. |  |
| For future cases, would you consider requesting or prefer the FDLE team handle the FIGG? | Yes  No  Maybe  I would like more information on FDLE’s capacity/capabilities |
| Please include any additional feedback you wish to provide. |  |

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| Recipient Chief Official Signature or Designee |  | Date |  | Recipient Chief Official or Designee Printed Title and Name |